

01-11-02

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		Attorney Docket No. 71189-1383
		First Inventor GARY A. KASPER ET AL.
		Title PROTECTANT APPLICATION
		Express Mail Label No. EI 992 961 664 US

1. Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification [Total Pages 31]
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

Drawing(s) (35 U.S.C. 113) [Total Sheets 19]

Oath or Declaration [Total Pages 4]

- a. Newly executed (original or copy)
- b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. Application Data Sheet. See 37 CFR 1.76

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a. Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
- c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS		
9.	<input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10.	<input type="checkbox"/> 37 CFR 3.73(b) Statement	<input type="checkbox"/> Power of Attorney (when there is an assignee)
11.	<input type="checkbox"/> English Translation Document (if applicable)	
12.	<input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input checked="" type="checkbox"/> Copies of IDS Citations (16 refs.)
13.	<input type="checkbox"/> Preliminary Amendment	
14.	<input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15.	<input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16.	<input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17.	<input type="checkbox"/> Other:	
.....		

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

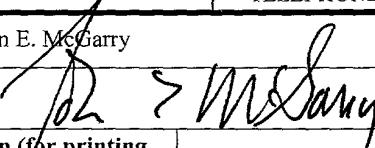
 Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application information: Examiner _____

Group/Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	20915	or	<input type="checkbox"/> Correspondence address below
FIRM	McGARRY BAIR LLP		
NAME	John E. McGarry, Reg. No. 22,360		
ADDRESS	171 Monroe Avenue, NW, Suite 600		
CITY	Grand Rapids	State	Michigan
COUNTRY	US	TELEPHONE	Zip Code 49503 FAX 616-742-1010
Name (Print/Type)	John E. McGarry	Registration No. (Attorney/Agent)	Reg. No. 22,360
Signature		Date	January 9, 2002
20. Assignee Information (for printing on face of publication)		BISSELL Homecare, Inc.	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, DC 20231

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,596)**METHOD OF PAYMENT** (check one)

The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 50-2003

Deposit Account Name McGarry Bair LLP

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status. See 37 CFR 1.27

Payment Enclosed:
 Check Credit Card Money Order Other
FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 740)**2. EXTRA CLAIM FEES**

Total Claims	56	-20**=	36	X	18	=	648	Fee from below	Fee Paid
Independent Claims	5	-3**=	2	X	84	=	168		

Multiple Dependent

**or number previously paid, if greater; For Reissues, see below.

Large Entity Fee Description

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 816)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	John E. McGarry	Registration No. (Attorney/Agent)	Reg. No. 22,360	Telephone	(616) 742-3500
Signature	John E. McGarry			Date	1/9/2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: GARY A. KASPER ET AL.

For: PROTECTANT APPLICATION

Docket No. 71189-1383

Commissioner for Patents
Washington, D.C. 20231

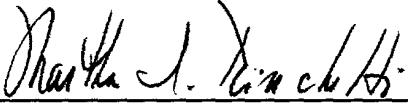
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Date of Deposit: January 9, 2002

Sir:

I hereby certify that this paper and/or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to BOX PATENT APPLICATION, Commissioner for Patents, Washington, D.C. 20231.

Dated: January 9, 2002



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